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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/821,809	04/08/2004	Suketu P. Sanghvi	P0453.70116US01	9063
	7590		EXAMINER	
c/o WOLF, GREENFIELD & SACKS, P.C. 600 ATLANTIC AVENUE			SPIVACK, PHYLLIS G	
BOSTON, MA			ART UNIT	PAPER NUMBER
			1614	
			MAIL DATE	DELIVERY MODE
			09/10/2008	PAPER

Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.

Intonsious Summons	10/821,809	SANGHVI ET AL.			
Interview Summary	Examiner	Art Unit			
	Phyllis G. Spivack	1614			
All participants (applicant, applicant's representative, PTO	personnel):				
(1) <u>Phyllis G. Spivack</u> .	(3)				
(2) <u>Zoran Z. Zdraveski, Ph.D.</u> .	(4)				
Date of Interview: 08 September 2008.					
Type: a)⊠ Telephonic b)⊡ Video Conference c)⊡ Personal [copy given to: 1)⊡ applicant 2	²)∏ applicant's representative	;]			
Exhibit shown or demonstration conducted: d) Yes If Yes, brief description:	e) No.				
Claim(s) discussed: <u>1-112 and 114</u> .					
Identification of prior art discussed:					
Agreement with respect to the claims f)⊠ was reached. g)□ was not reached. h)□ N	I/A.			
Substance of Interview including description of the general nature of what was agreed to if an agreement was reached, or any other comments: <u>Dr. Zdraveski stated S.N. 10/821,809 is abandoned</u> .					
(A fuller description, if necessary, and a copy of the amendments which the examiner agreed would render the claims allowable, if available, must be attached. Also, where no copy of the amendments that would render the claims allowable is available, a summary thereof must be attached.)					
THE FORMAL WRITTEN REPLY TO THE LAST OFFICE A INTERVIEW. (See MPEP Section 713.04). If a reply to the GIVEN A NON-EXTENDABLE PERIOD OF THE LONGER INTERVIEW DATE, OR THE MAILING DATE OF THIS INTELE A STATEMENT OF THE SUBSTANCE OF THE INTELE Requirements on reverse side or on attached sheet.	last Office action has already OF ONE MONTH OR THIRTY ERVIEW SUMMARY FORM, '	been filed, APPI / DAYS FROM T WHICHEVER IS	LICANT IS HIS LATER, TO		

Application No.

Applicant(s)